



# Accessing Medicaid Long Term Care (LTC) Services

## What is Medicaid?

Medicaid is the state and federal partnership that provides health coverage for selected categories of individuals with low income and limited assets.

## What is EqualityCare?

EqualityCare is Wyoming's Medicaid program.

## Long Term Care (LTC) Waiver

The Long Term Care Waiver offers an option for individuals who need nursing home level of care, but wish to remain in their home and receive specialized services that could delay or prevent admission to a nursing home.

## Assisted Living Facility (ALF) Waiver

The Assisted Living Facility Waiver offers an option for individuals who need nursing home level of care, but wish to remain in the community in an assisted living facility and receive specialized services that may delay or prevent admission to a nursing home.

## Eligibility Criteria

- **Must meet:**
  - U.S. Citizenship/Immigration Status.
  - Resident of Wyoming or intends to reside in Wyoming.
  - Age 65 or older, blind or disabled.
  - Must be age 19 or older.
- **Must meet the Medical Necessity, level of care, required for entry into a Nursing Home.**
- **Must have approved Plan of Care.**
- **Income is defined as anything received in cash or in kind, that can be used to meet an individual's needs.**
  - Income is counted:
    - When it is received.
    - When it is credited to an individual's account.
    - When it is set aside for an individual's use.
- **Must meet income guidelines:**
  - Gross monthly income cannot currently exceed \$2022.
  - Individuals with income above \$2022 may qualify by establishing an Income Trust.
- **Assets include real and personal property that an individual owns. Some assets are not counted in the limit, such as but not limited to:**
  - One (1) home may be excluded if the value is less than \$500,000 and it is the individual's primary place of residence.
  - One (1) Vehicle may be excluded.



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- **Must meet asset guidelines:**
  - Individual - \$2,000.
  - Couple - \$3,000, when both are applying.
  - Couple - \$109,560 when one is applying.

- **Transfer of Assets:**

Medicaid law prohibits the transfer of assets for less than market value by an institutionalized Medicaid applicant/recipient or anyone acting on their behalf.

- Certain transfers are allowable, such as the transfer of a home to a spouse or disabled child.
- A 60 month look back period applies to assets transferred on or after 2/8/06.
- A penalty is applied for a period of time based on the uncompensated value of the transferred asset. The length of the penalty is calculated by dividing the uncompensated value of the transferred asset by the average monthly private pay rate for nursing home care (currently \$5,768). The penalty begins the day the applicant becomes Medicaid eligible.
  - The individual is not eligible for Medicaid benefits during the penalty period.

## Cost of Care

- **Long Term Care (LTC) Waiver:**  
A recipient is not responsible to contribute towards the cost of services provided under the LTC waiver.
- **Assisted Living Facility (ALF) Waiver:**  
A recipient is responsible to pay the room and board cost under the ALF waiver.

## Application Process

Medical Necessity Assessment (LT101) completed by the Public Health Nurse.

Apply at any Department of Family Services Office:

- Complete the Application for Benefits, DFS 100.
  - An interview must be completed within 45 days from the date of application.
  - An application must be approved or denied within 45 days from the date of application unless:
    - Waiting for third party verification. In this case, the decision must be made within 60 days.
    - A pending disability determination. In this case, a decision should be made within 90 days.
- Application is not required for individuals receiving SSI.
- If SSI is lost, an application will be required to redetermine eligibility.

## Benefits Begin

Benefits begin the 1<sup>st</sup> day of the month the Plan of Care is approved by WDH and a slot is available, if all eligibility factors are met.



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## **Periodic Reviews**

Cases are reviewed every 12 months to determine continued eligibility. A periodic review is not required for SSI individuals.

## **Benefits may be lost**

Benefits will close on the first day of the next month when any of the following occur:

- Individual leaves the Assisted Living Facility (ALF) or no longer needs services provided by the Long Term Care (LTC) HCBS Waiver, and is not eligible for another Medicaid program.
- Individual does not complete periodic review.
- Individual enters a public institution, excluding Uinta Hall.
- Individual determined no longer eligible.

## **Notification to the Applicant**

The Department of Family Services notifies the applicant of all pending, approval, denial and closure actions by sending the appropriate computer generated notices.

## **Notification to Case Manager**

The Department of Family Services notifies the Case Manager of pending, approval, denial and closure actions by sending the Notice to Case Manager Form to the Case Manager.

## **For more information:**

Wyoming Department of Health, Aging Division: <http://wdh.state.wy.us/aging>

Wyoming Department of Health, EqualityCare:

<http://www.health.wyo.gov/healthcarefin/equalitycare>

EqualityCare Eligibility Manual: <http://ecom.health.wyo.gov>